

Construction Contractor's Capability Statement

The undersigned certifies that the information provided herein is true and sufficiently complete so as not to be misleading.

COMPANY NAME

Stoven Construction Co. Inc.

ADDRESS

1460 Trinity Drive , Suite 8

CITY

Los Alamos

STATE

NM

ZIP CODE

87544

PHONE

505-884-7550

FAX

505-884-7551

EMAIL:

csstoven@nmia.com

PRIMARY CONTACT:

Cliff Sandoval

TYPE OF CONSTRUCTION WORK (Check all that apply)

☐ General----List Primary Expertise _____

☒ Site Work

☒ Structural

☒ Carpet

☒ Mechanical

☒ Demolition

☒ Steel Fencing

☒ Roofing

☒ Clean Room

☐ Exterior Utilities

☒ Masonry

☒ Building

☒ Fire Protection

☐ Paint

☒ Mechanical (HVAC/Plumbing)

☒ Electrical

☐ Nuclear Facility

COMPANY PROFILE:

How many years has your organization been in a business as a construction contractor?

4 years

How many years has your organization been in the construction business under its present business name?

3 ½ years

Under what former names has your organization operated?

Stoven Contractors

List the names and titles of the key individuals of your organization, years with firm, educational training and qualifications.

Jeff Romero – Owner – 4 years – Bachelors from Anderson School of Mgt. At UNM

Cliff Sandoval – Marketing & Business Development Director – 1 ½ years – Bachelors from Anderson School of Mgt. At UNM – TUCK School of Business

List the categories of work that your organization normally performs with its company personal.

| |
|---------------------------------------------------------------------------------------|
| Commercial Construction, Metal Building, Remodel, Concrete of all phases, Civil Work, |
| Management |
| |
| |

List the major projects your organization has in progress or has completed in the past five years, owner, contact amount, date/expected completion, percentage performed with its company personal

| |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Department of Interior – Historic Preservation (stucco, plaster, & remodel) & Electrical upgrade – \$3 million a year 5-year project. Project Began April 2002. |
| Raton High School – New Structure of Lab Complex - \$2.9 million contract. |

List your Trade References

| |
|----------------------------------------------|
| White Cap Construction Supply – 505-342-0705 |
| Zia Concrete Supply |
| CALPLY Inc. – 505-344-0011 |
| Pace Iron Works – 505-873-2611 |
| |
| |

List your Surety Company or your banking affiliates.

| |
|------------------------------------------------------------|
| First State Bank – 7900 Jefferson NE, 87109 – 505-241-7600 |
| Surety Provider/ Old Republic |
| |

What is your organization's current bonding rate?

Single __\$3million__ Aggregate __\$4.5million__

Has your firm entered into a contract that had to be completed by your surety within the past five years?

Yes ☐ No ☒

List your Contractor's New Mexico license classification(s):

| |
|---------------------|
| GB98 License #80639 |
|---------------------|

Safety History:

List your firm's: Workmen's compensation Experience Modification Rate (EMR), Total recordable Injury/Illness case rate, and Lost workday case rate for the current period (calendar year to-date) and the previous three year period.

____ Zero losses for the last 4 years _____
____ Rating is at .77 _____

Rate Type: Interstate_____, In-State____x____, Monopolistic_____

Insurance Carrier:

| |
|-----------------------------|
| Four Corner's Insurance Co. |
|-----------------------------|

What is your firm's North American Industrial Classification System (NAICS) code?

| |
|--------|
| 233320 |
|--------|

Check all that apply to your organization. Provide certification if 8(a) Certified or Small Disadvantaged.

☐ Woman owned ☒ Small Business ☐ Small Disadvantaged ☒ 8(a) ☐ Large ☐ Veteran
☐ Disabled Veteran ☒ HUBZone

Present number of employees

☐ 1-20 ☒ 21-40 ☐ 41- 60 ☐ 61 – 100 ☐ Over 100